

APPLICATION FROM A PERMANENT/CID TEACHER FOR REDEPLOYMENT IN ACCORDANCE WITH THE POST PRIMARY REDEPLOYMENT SCHEMES

Part 1 – to be completed by Teacher

A: Redeployment Schemes Tick the relevant box below to indicate:	Compulsory	Voluntary
<ul style="list-style-type: none"> • the scheme under which you are applying for redeployment and • if you are a compulsory or voluntary applicant 		
1. School/ETB has staff in excess of its allocation - Refer to the <i>Redeployment scheme for teachers surplus to requirements other than in situations of school closure</i> and/or the <i>Redeployment scheme for teachers surplus to requirements in consequence of school closure</i>		
2. School/ETB has a teacher returning from career break/secondment and the replacement teacher was awarded a CID under Circular 0024/2015 - Refer to <i>Paragraph 7 of Part A of Circular 0024/2015</i>		
3. School/ETB has a Curricular Mismatch and a teacher of the subject(s) was awarded a CID under Circular 0024/2015 - Refer to <i>Part D of Circular 0024/2015</i>		

B: School Details			
Name		Roll	
Address		Number	

C: Teacher Details			
Name			
Home Address in the next school year			
Phone Number		Email address	
PPS Number		Teaching Council Registration Number*	
Subjects Registered:	1.	2.	3.
<i>*A copy of your current Teaching Council Registration, including subjects registered, must be attached to this form</i>			

D: Teacher Qualifications		
Degree Title		Subjects in final degree examinations
Awarding Body		1.
College attended		2.
Year Awarded		3.
Level of Award		

H. Dip in Education	Yes / No	Honours / Pass	Year Awarded	
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E: Other/Specialist Qualifications (e.g. Guidance, Special Educational Needs, etc.)		
Title	Awarding Body	Year Awarded

F: Are you currently on approved leave of absence? <i>If Yes, please provide details below</i>		Yes / No <i>(delete as appropriate)</i>
<i>Type of approved leave</i>	<i>Start Date</i>	<i>End Date</i>

G: Teaching Experience					
Subjects taught <i>(please list all of your teaching experience, in chronological order)</i>					
<i>Subject</i>	<i>Cycle</i>	<i>Level</i>	<i>From</i>	<i>To</i>	<i>School</i>

Your timetabled hours in 2018/19 or most recent year in service – state year			
<i>Subject</i>	<i>Cycle</i>	<i>Level</i>	<i>Hours/week</i>

Your timetabled hours in 2017/18 or year prior to most recent year service – state year			
<i>Subject</i>	<i>Cycle</i>	<i>Level</i>	<i>Hours/week</i>

H: Post of Responsibility <i>(Provide details of current Department supported post of responsibility, if any)</i>

I: Compulsory Applicants Only <i>Do you want to be redeployed within 50 km of your home or school address?</i>	<i>(delete as appropriate)</i> Home / School
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J: Compulsory and Voluntary Applicants

State the location(s) to which you wish to be redeployed.

K: Certification of Teacher

Please answer YES below to confirm that you have provided all necessary information and that you accept the terms of the redeployment scheme.

I certify that the information provided in this form is accurate and complete.

I attach a copy of my current Teaching Council registration **including confirmation of subjects registered.**

I understand that under Section 30 of the Teaching Council Act 2001, I am required to maintain my registration with the Teaching Council in order to be paid salary in accordance with **Circular 0052/2013.**

I confirm that I will be contactable using the details I have provided in this form.

I accept that if I am redeployed, a copy of this form will be provided to the school.

I accept that if I am redeployed, I will be subject to the requirements of the National Vetting Bureau (Children and Vulnerable Persons) Acts 2012 to 2016 and of **Circular 0031/2016.**

I accept that I will receive only one offer of redeployment by email to the address I have provided.

I accept that the decision of the Director of Redeployment is final.

Signature of Teacher: _____ **Date:** _____

Data Protection Privacy Statement

The Department requires the personal data provided by you for the purpose of the redeployment scheme.

The personal data provided may be shared with the Directors of Redeployment, the school to which you will be redeployed and the Teaching Council in respect of the status of your registration.

The privacy notice outlining further information in relation to this form can be found at <https://www.education.ie/en/The-Department/Data-Protection/gdpr/>

Full details of the Department's data protection policy setting out how we will use your personal data as well as information regarding your rights as a data subject are available at www.education.ie/en/The-Department/Data-Protection/

Part 2 – to be completed by School Management**Certification of School Management**

- I certify that the above information is accurate and complete in accordance with school records.
- Where redeployment is under category 2 or 3 in Part A, I attach the completed **Form RD2.**

Signature: _____
Chief Executive / Principal / Secretary to Board of Management
 (Delete as appropriate)

Date: _____

Note: Where the applicant is a teacher in an ETB school, the signature of the Chief Executive is required.

School/ETB Stamp

**The completed form should be returned by 8 March 2019 to:
 Post Primary Allocations Section, Department of Education and Skills, Athlone, Co. Westmeath, N37 X659.**